

Message Text

CONFIDENTIAL

PAGE 01 KABUL 07112 01 OF 02 230833Z

10

ACTION NEA-07

INFO OCT-01 SS-14 ISO-00 SP-02 EB-03 NSC-05 NSCE-00 IGA-01

/033 W

----- 043417

P 230735Z SEP 76

FM AMEMBASSY KABUL

TO SECSTATE WASHDC PRIORITY 9515

C O N F I D E N T I A L SECTION 1 OF 2 KABUL 7112

LIMDIS

E. O. 11652: GDS

TAGS: AF, US, EAID

SUBJECT: POSSIBLE MEETING AT UNGA BETWEEN THE SECRETARY AND
AFGHAN DEPUTY FOREIGN MINISTER: U.S. ASSISTANCE
TO AFGHANISTAN

REF: (A) STATE 223874 (B) KABUL 6869 (C) KABUL 6597

SUMMARY: DEPUTY FOREIGN MINISTER ABDULLAH HAS INDICATED THAT THE ONE ASPECT OF THE SECRETARY'S RECENT MESSAGE TO PRESIDENT DAOUD ON U.S. ASSISTANCE (REF A) WHICH DAOUD HAD TROUBLES WITH WAS OUR REFUSAL TO BUILD A HOSPITAL IN KABUL. ABDULLAH HOPES TO PURSUE THIS MATTER FURTHER WITH THE SECRETARY IN NEW YORK. THIS MESSAGE ANALYSES THE POLITICAL AND DEVELOPMENTAL ASPECTS OF THE HOSPITAL PROJECT. IT RECOMMENDS THAT WE MAINTAIN OUR POSITION STATED IN THE SECRETARY'S MESSAGE TO DAOUD THAT "WE PREFER TO CONCENTRATE (IN THE HEALTH FIELD) ON THE RECENTLY INITIATED BASIC HEALTH SERVICES PROJECT".
END SUMMARY.

1. DEPUTY FOREIGN MINISTER ABDULLAH TOLD ME SEPTEMBER 19 THAT PRESIDENT DAOUD HAD BEEN PLEASED WITH THE SECRETARY'S MESSAGE WHICH I DELIVERED ORALLY ON SEPTEMBER 16 (REF B) EXCEPT THAT DAOUD CONTINUES TO ATTACH GREAT IMPORTANCE TO OUR BUILDING A HOSPITAL
CONFIDENTIAL

CONFIDENTIAL

PAGE 02 KABUL 07112 01 OF 02 230833Z

IN KABUL. ABDULLAH SAID HE WOULD PURSUE THIS

MATTER WITH THE SECRETARY IN NEW YORK ASSUMING HIS REQUEST FOR A MEETING IS GRANTED.

2. ABDULLAH WENT ON TO SAY THAT THE GOVERNMENT OF AFGHANISTAN (GOA) WANTS A U.S.-BUILT HOSPITAL IN KABUL BECAUSE IT NEEDS A HIGHLY VISIBLE AMERICAN SYMBOL, A "MONUMENT", WHICH WILL MAKE CLEAR TO ALL CONCERNED THAT THE U.S. SUPPORTS AFGHAN INDEPENDENCE. PLEASED AS THE GOA IS WITH OTHER U.S. PROJECTS, ABDULLAH SAID NONE OF THEM MEETS THIS NEED FOR HIGH VISIBILITY OR COUNTERS CONSTANT SOVIET PROPAGANDA ABOUT SOVIET AID TO AFGHANISTAN, MUCH OF WHICH (HOSPITAL, HOUSING PROJECT IN KABUL) IS HIGHLY VISIBLE. EVEN THE NEW \$50 MILLION KANDAHAR CEMENT PLANT, TO BE CONSTRUCTED AND EQUIPPED BY U.S. FIRMS, DOESN'T MEET THE GOA'S VISIBILITY CRITERION BECAUSE IT IS IN KANDAHARA, NOT KABUL, AND IS IRANIAN-FINANCED. IN RESPONSE, I TOLD ABDULLAH, AS I HAD TOLD DAOUD, THAT IN THE HEALTH FIELD WE WANT TO CONCENTRATE ON THE RECENTLY STARTED RURAL BASIC HEALTH CENTER PROJECT.

3. THIS JRZ CONCERTED GOA CAMPAIGN. TWO OTHER MINISTERS HAVE MENTIONED THE HOSPITAL PROJECT TO ME IN THE LAST TWO DAYS. WITH MINISTER OF HEALTH OMAR ON SEPTEMBER 20, USAID DIRECTOR BROWN AND I DID NOT DISCOURAGE THE MINISTER FROM GIVING US MORE INFORMATION ON THE HOSPITAL PROJECT, BUT ALSO GAVE HIM NO ENCOURAGEMENT THAT WE WOULD UNDERTAKE SUCH A PROJECT. WHEN BROWN REVIEWED THE SECRETARY'S MESSAGE ON SEPTEMBER 23 WITH PLANNING MINISTER KHURRAM, KHURRAM GAVE HIM AN EXTREMELY HARD TIME ON THE HOSPITAL PROJECT WHILE ALSO SAYING HE HAD NOT YET DISCUSSED THE MATTER WITH DAOUD. KHURRAM SUGGESTED TO BROWN THAT U.S. MIGHT UNDERTAKE A FEASIBILITY STUDY FOR A HOSPITAL. THIS IS NOT YET A FORMAL GOA PROPOSAL, BUT IT MAY BE THE NEXT STEP THE AFGHANS WILL PROPOSE AFTER KHURRAM DISCUSSES IT WITH DAOUD. IF AND WHEN WE GET A FORMAL REQUEST, WE WILL REFER IT TO THE DEPARTMENT AND AID/W.

CONFIDENTIAL

CONFIDENTIAL

PAGE 03 KABUL 07112 01 OF 02 230833Z

4. I AM NOT PERSUADED BY THE POLITICAL ARGUMENT USED BY ABDULLAH. FIRSTLY, WHILE WE MIGHT DO A BETTER JOB PUBLICIZING OUR AID --- AND USIS IS WORKING ON THIS ---, I DO NOT THINK WE NEED A HOSPITAL TO MAKE OUR PRESENCE POLITICALLY VISIBLE. SECONDLY, AS INDICATED BELOW, THE CHANCES THAT AN AMERICAN-BUILT HOSPITAL WOULD BE A SUCCESSFUL HOSPITAL WITHOUT A CONTINUING AMERICAN INPUT FOR MANY YEARS ARE EXTREMELY SLIM.

UNLESS WE COULD GUARANTEE SUCH AN INPUT, THE HOSPITAL WOULD LIKELY FAIL, WHICH WOULD POLITICALLY WORSE THAN NO HOSPITAL AT ALL. ON POLITICAL GROUNDS, THEREFORE, OUR PRESENT ANSWER, STRESSING OUR PREFERENCE TO PURSUE THE BASIC HEALTH CENTER PROJECT, MAKES SENSE.

5. TO GIVE DEPARTMENT AND AID PERSPECTIVE ON AFGHAN CONCEPT AND PARAMETERS OF POSSIBLE U.S. INVOLVEMENT, WE HAVE TRIED IN A GENERAL WAY TO FIND OUT WHAT IS FORESEEN BY THE AFGHANS. BEST TECHNICAL DESCRIPTION OF WHAT GOA WANTS HAS COME TO US FROM MINISTER OF PUBLIC HEALTH OMAR, WHO PRESSED CASE FOR 500-BED HOSPITAL IN SEPTEMBER 20 DISCUSSION WITH USAID DIRECTOR AND HEALTH/FAMILY PLANNING OFFICER AND ME. MAIN POINTS OF OMAR PRESENTATION WERE:

A. MODERN HOSPITAL NEEDED TO TREAT SERIOUS AND COMPLEX CASES. (MINISTER FORCED TO APPROVE UP TO TWENTY-FIVE REQUESTS PER DAY FROM AFGHANS WISHING GO ABROAD FOR MEDICAL CARE, USUALLY TO INDIA.)

B. COUNTRY NEEDS A TEACHING HOSPITAL OFFERING FULL-FLEDGED, INTERNATIONAL-STANDARD RESIDENCY PROGRAMS FOR AFGHAN PHYSICIANS.

C. PROPOSED HOSPITAL WOULD ABSORB MANY GRADUATES FROM KABUL UNIVERSITY, IDEABEING HOSPITAL WOULDMEHOOSE CREAM OF CROP WHO PRESENTLY LARGELY EMPLOYED IN GOVERNMENT BUREAUCRATIC OR MEDICAL JOBS WITHOUT ANY FURTHER TRAINING.

6. THE GOA REQUEST WOULD ENTAIL FOLLOWING MINIMUM INPUTS
CONFIDENTIAL

CONFIDENTIAL

PAGE 04 KABUL 07112 01 OF 02 230833Z

BASED ON OUR KNOWLEDGE OF AFGHAN SITUATION/CAPABILITIES:

A. CONSTRUCTION OF A FULLY-EQUIPPED, 500-BED HOSPITAL WOULD COST ABOUT \$25 MILLION, WE JUDGE, BASED ON DEAN RIGBY (OF RECENT WHO-FINANCED UNIVERSITY OF NEBRASKA

CONFIDENTIAL

NNN

CONFIDENTIAL

PAGE 01 KABUL 07112 02 OF 02 230846Z

22-10

ACTION NEA-07

INFO OCT-01 SS-14 ISO-00 SP-02 EB-03 NSC-05 NSCE-00 IGA-01

/033 W

----- 044126

P 230735Z SEP 76

FM AMEMBASSY KABUL

TO SECSTATE WASHDC PRIORITY 9516

C O N F I D E N T I A L SECTION 2 OF 2 KABUL 7112

LIMDIS

MEDICAL ADVISORY TEAM) ESTIMATE OF U.S. PER BED COSTS IN EXCESS \$47,000. COST COULD BE SOMEWHAT HIGHER DUE TO COSTS OF SHIPMENT AND INSTALLATION OF SOPHISTICATED MEDICAL EQUIPMENT AND PROBABLE NEED FOR EXPATRIATE SUPERVISION OF CONSTRUCTION TRULY MODERN HOSPITAL COMPLEX.

B. USEFUL RESIDENCY PROGRAM WOULD REQUIRE EXPATRIATE STAFF (PHYSICIANS, NURSES, TECHNICIANS, ADMINISTRATIVE, CUSTODIAL) FOR SOME 15-20 YEARS. WITH HIGHER NUMBERS IN EARLY YEARS. FULL U.S. TEACHING/WORKING STAFF OF APPROXIMATELY 15-20 WOULD COST IN NEIGHBORHOOD \$1-1.5 MILLION PER YEAR FOR FIRST FIVE YEARS OF HOSPITAL OPERATION. WE WOULD ESTIMATE ROUGHLY \$15.0 MILLION TOTAL FOR 15- YEAR PROJECT.

C. MAJOR ASSISTANCE TO KABUL UNIVERSITY MEDICAL FACULTY WOULD BE NEEDED TO CREATE CAPACITY TO PRODUCE PERSONNEL ABLE TO MAINTAIN MODERN TEACHING HOSPITAL. THIS ELEMENT, INCLUDING ADVISORS, COMMODITIES AND TRAINING (BUT NO CONSTRUCTION) WOULD COST AT LEAST \$18.0 MILLION OVER 15- YEAR PERIOD.

D. BUREAUCRATIC RELATIONSHIPS AMONG MINISTRY OF PUBLIC HEALTH, KABUL UNIVERSITY MEDICAL FACULTY AND PROPOSED HOSPITAL ADMINISTRATION WOULD HAVE TO BE FIRMLY AND EFFECTIVELY ESTABLISHED. (AMERICAN UNIVERSITY OF BEIRUT TYPE ARRANGEMENT SUGGESTS ITSELF.) FURTHER, VARIOUS MORE OR LESS PERMANENT TRAINING/INFORMATION- EXCHANGE RELATIONSHIPS BETWEEN THE KABUL ENTERPRISE AND ONE OR MORE U.S. MEDICAL SCHOOLS AND OTHER MEDICAL INSTITUTIONS WOULD BE NECESSARY. TRAINING AND TRAVEL COSTS MIGHT BE \$3 MILLION TO \$4 MILLION FOR A 15- YEAR PROGRM.

CONFIDENTIAL

CONFIDENTIAL

PAGE 02 KABUL 07112 02 OF 02 230846Z

OBVIOUSLY, CONSIDERABLE ANALYSIS WOULD BE NEEDED FOR SERIOUS FEASIBILITY EXAMINATION AND COSTING, BUT ROUGH FIGURES PRESENTED ABOVE ADD AS FOLLOWS FOR 15-YEAR PROJECT:

CONSTRUCTION/EQUIPMENT	\$25 MILLION
EXPATRIATE HOSPITAL STAFF	15 MILLION
K.U. MEDICAL FACULTY ASSISTANCE	18 MILLION
U.S. INSTITUTIONAL EXCHANGE	4 MILLION
TOTAL	\$62 MILLION

7. KABUL CITY AREA CONTAINS FIVE PERCENT OF NATION'S POPULATION AND MOST OF ITS MEDICAL FACILITIES/SERVICES (2000 BEDS IN SEVERAL HOSPITALS AND CLINICS, 80 PERCENT OF PHYSICIANS). COUNTRY AS WHOLE HAS BIRTH RATE OF 50 PER 1000; INFANT MORTALITY RATE IS OVER 200 PER 1000 AND CHILDHOOD MORTALITY IS ONE OF THE WORLD'S HIGHEST; MATERNAL MORTALITY RATE IS NEAR HIGHEST OR HIGHEST IN WORLD (SEX RATION AT AGES 15-19 IS 133/100, MALES/FEMALES). LEADING CAUSES OF DEATH IN CHILDREN ARE DIARRHEAL DISEASE, PULMANORY INFECTIONS, MEASLES --ALL OF WHICH USUALLY ASSOCIATED WITH MALNUTRITION. DIESASES OF AGING ARE MINIMAL; LIFE EXPECTANCY AT BIRTH IS 35 YEARS. IN TOTAL POPULATION, HIGH PREVALENCE OF INTESTINAL PARASITISM, AMEBIASES, TUBERCULOSIS, TRACHOMA AND VARIOUS EFFECTS OF CHRONIC MALNUTRITION. PRIMARY NATIONAL NEED IS FOR MEDICAL SERVICE PROGRAM CAPABLE OF MANAGING OBSTETRICAL, MEDICAL, AND PEDIATRIC PROBLEMS IN RURAL AREAS. HIGH LEVEL VIOLENCE IN SOCIETY REQUIRES SOME TRAUMA CARE AS WELL. HIGHEST PRIORITY SHOULD BE ASSIGNED PREVENTIVE CARE/EDUCATION-- COMMUNITY AND FAMILY SANITATION, NUTRITION. MOST OF THESE PROBLEMS REQUIRE, IN OUR VIEW, SOME PHYSICIANS AND MANY TRAINED PARA-MEDICALS. RECENTLY BEGUN USAID-SUPPORTED BASIC HEALTH SERVICES PROJECT ADDRESSES THESE PROBLEMS AND, OVER NEAR TERM, WILL DEMAND CONSIDERABLE TIME/ ATTENTION OF BEST AFGHAN PERSONNEL AS WELL AS ANNUALLY INCREASING RESOURCES.

8. WE DOUBT THAT MAJOR EFFORT IN HIGHLY SOPHISTICATED HOSPITAL PROJECT COULD BE UNDERTAKEN SIMULTANEOUS WITH ESTABISHMENT/ MAINEYNANCE RURAL HEALTH INFRASTRUCTURE WITHOUT MUCH GREATER COMMITMENT OF AFGHAN RESOURCES AND WILL THAN PROBABLE BY PRESENT INDICATIONS. AS IT IS, THERE WILL BE COMPLETITION FOR PERSONNEL BETWEEN BASIC HEALTH SERVICES PROJECT AND TWONEW PROVINCIAL HOSPITALS (250-BED, CHINESE-ASSISTED UNIT NEARING CONFIDENTIAL

CONFIDENTIAL

PAGE 03 KABUL 07112 02 OF 02 230846Z

COMPLETION IN KANDAHAR AND ANOTHER 250-BED, IRAQ-FINANCED HOSPITAL TO BE STARTED IN 1977 IN HERAT).

9. THE MINISTER'S PROBLEM OF REQUESTS FOR TRAVEL FOR MEDICAL CARE IS CAUSED BY A FUNDAMENTAL LACK OF PHYSICIAN COMPETENCY AND GOOD HOSPITAL ADMINISTRATION. ANCILLARY TO THIS IS A LACK OF ESSENTIAL LABORATORY AND TREATMENT FACILITIES. HOWEVER, IF THESE LATTER WERE AVAILABLE, THEY CULD NOT BE USED EFFECTIVELY BECAUSE OF POOR PHYSICIAN TRAINING IN MEDICAL SCHOOL. POST-GRADUATE EDUCATION IS NO SUBSTITUTE FOR POOR BASIC TRAINING, EXCEPT IN RARE INSTANCES.

10. OUR CONSLUSION IS THAT EVEN WERE A SOPHISTICATED HOSPITAL AND PROFESSIONAL STAFF DEVELOPED, CONSTRAINTS EXTERNAL TO THE MEDICAL SYSTEM WOULD PREVENT ITS MEETING AFGHAN NEEDS AS WE UNDERSTAND THEM. IF THERE HAVE BEEN SIMILAR EFFORTS ELSEWHERE IN THE WORLD, E.G. AMONG THE LEAST DEVELOPED DOZEN COUNTRIES, AID/W KNOWLEDGE OF RESULTS SHOULD BE USEFUL IN AGAIN LOOKING AT GOA REQUEST.

11. TO AVOID HUGE (FOR AFGHANISTAN) U.S. INVESTMENT IN PROJECT OUTSIDE REAL AFGHAN DEVELOPMENT PRIORITIES WHICH WOULD BE HIGH RISK AT BEST, TECHNICAL AND DEVELOPMENTAL AS WELL AS POLITICAL FACTORS

THEREFORE ARGU FOR OUR STICKING RO PREVIOUS COUNSEL OF FIRST PRIORITY ON EXTENSION OF BASIC PROGRAM TO MAJORITY POPULATION NOT NOW RECEIVING HEALTH SERVICE.

ELIOT

CONFIDENTIAL

NNN

Message Attributes

Automatic Decaptioning: Z
Capture Date: 01 JAN 1994
Channel Indicators: n/a
Current Classification: UNCLASSIFIED
Concepts: ECONOMIC ASSISTANCE, DIPLOMATIC DISCUSSIONS, HOSPITALS, DEVELOPMENT PROGRAMS
Control Number: n/a
Copy: SINGLE
Draft Date: 23 SEP 1976
Decaption Date: 28 MAY 2004
Decaption Note: 25 YEAR REVIEW
Disposition Action: RELEASED
Disposition Approved on Date:
Disposition Authority: greeneet
Disposition Case Number: n/a
Disposition Comment: 25 YEAR REVIEW
Disposition Date: 28 MAY 2004
Disposition Event:
Disposition History: n/a
Disposition Reason:
Disposition Remarks:
Document Number: 1976KABUL07112
Document Source: CORE
Document Unique ID: 00
Drafter: n/a
Enclosure: n/a
Executive Order: GS
Errors: N/A
Film Number: D760359-0177
From: KABUL
Handling Restrictions: n/a
Image Path:
ISecure: 1
Legacy Key: link1976/newtext/t19760929/aaaaayic.tel
Line Count: 293
Locator: TEXT ON-LINE, ON MICROFILM
Office: ACTION NEA
Original Classification: CONFIDENTIAL
Original Handling Restrictions: LIMDIS
Original Previous Classification: n/a
Original Previous Handling Restrictions: n/a
Page Count: 6
Previous Channel Indicators: n/a
Previous Classification: CONFIDENTIAL
Previous Handling Restrictions: LIMDIS
Reference: 76 STATE 223874, 76 KABUL 6869, 76 KABUL 6597
Review Action: RELEASED, APPROVED
Review Authority: greeneet
Review Comment: n/a
Review Content Flags:
Review Date: 02 JUN 2004
Review Event:
Review Exemptions: n/a
Review History: RELEASED <02 JUN 2004 by ShawDG>; APPROVED <27 SEP 2004 by greeneet>
Review Markings:

Margaret P. Grafeld
Declassified/Released
US Department of State
EO Systematic Review
04 MAY 2006

Review Media Identifier:
Review Referrals: n/a
Review Release Date: n/a
Review Release Event: n/a
Review Transfer Date:
Review Withdrawn Fields: n/a
Secure: OPEN
Status: NATIVE
Subject: POSSIBLE MEETING AT UNGA BETWEEN THE SECRETARY AND AFGHAN DEPUTY FOREIGN MINISTER: U.S. ASSISTANCE TO AFGHANISTAN
TAGS: EAID, PFOR, AF, US, UNGA
To: STATE
Type: TE
Markings: Margaret P. Grafeld Declassified/Released US Department of State EO Systematic Review 04 MAY 2006